ปี.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 1/29	2. Fiscal Year Covered From:
, ,	1 / 1 / 2004 Through: 12 / 31 / 2004
3. Name and address of person filing.	4. Name, file number, and address of labor organization.
Name Michael I Garland	Name AFL-CIO
	Labor Organization File Number 000-106
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any
Street 255 Carlton Ave., #2	Street 815 16th St. NW
City Broolyn	City Washington
State New York ZIP Code + 4 11205	State District of Columbia ZIP Code + 4 20006
5. Position in labor organization. Staff (Corp. Trans. Coordinat	or)
A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organization. 6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street	derived income or other economic benefit of on represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income. 7.b. Amount.
State ZIP Code + 4	To see the second secon
Signature	
15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)	
Signed //w/	On 8/9/2005 212-661-1555
	Date Telephone Number

Name of Person Filing Michael Garland	File Number U-	
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.		
8. Name and address of Business (including trace name, if any). Name Union Privilege Trade Name, if any: UP P.O. Box, Bldg., Room No., if any Suite 300 Street 1125 15th St. NW City Washington State District of Columbia ZIP Code + 4 20005	9. Business deals with: a. Labor Organization b. Trust c. Employer	
10 lf 0 h or 0 a in absolute size trust as a small results are seen	11.a. Nature of such dealing.	
10. If 9.b. or 9.c. is checked give trust or employer's name. Name Trade Name, if any: P.O. Box, Bldg., Room No., if any	Union Privilege (UP) sells credit cards and other retail products to union members and their families. The AFL-CIO established UP for this purpose, and UP licenses the AFL-CIO name for its products.	
Street	Description of the contract of	
	11.b. Approximate dollar value of such dealing.	
City	12.a. Nature of interest held or income received.	
State ZIP Code + 4	July 27, 2004 lunch meeting set up by UP to familiarize UP intern with AFL-CIO.	
	12.b. Amount. \$30	
	houses as pure una management a real and a series	
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.		
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	
Name		
Trade Name, if any:	For the second s	
P.O. Box, Bldg., Room No., if any		
Street		
City		
State ZIP Code + 4		
13 b. Is the Business an Employer	14.b. Amount of payment.	